PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



or <u>Fax</u>

(703) 746-4000

appropriate. All furt	ther corresponde rected below or	nce including the Pat	ent, advance orders and notification	BLICATION FEE (if required). Blocks I through 5 should be completed where ation of maintenance fees will be mailed to the current correspondence address as ew correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for
CURRENT CORRESPO	ONDENCE ADDRES	S (Note: Use Block 1 for any 11/01/2004	IPE	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.
HOFBAUE SUITE 205 N	IORTH		O'. To	I hereby certify that this ree(s) I ransmittal is being deposited with the United
1455 LAKES BURLINGT(SHORE ROAD ON, ON L7S		LAN 28 MILE	addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Signature) (Date) APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/720,528 11/25/2003 Patricia J. Marut 1025 / 93154PUS 5135

TITLE OF INVENTION: PORTABLE CONCAVE REFLECTOR ASSEMBLY

CANADA

APPLN. TYPE	SMALL ENTITY	Y ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional YES		\$685		\$300	\$985	02/01/2005		
EXAMINER AR			IT	CLASS-SUBCLASS				
YEUNG, JAMES C 37				126-681000	•			
"Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless	ence address (or Change of 6/2) attached. ion (or "Fee Address" Indica or more recent) attached. Use RESIDENCE DATA TO B. an assignee is identified be 37 CFR 3.11. Completion of	Correspondence ation form of a Customer E PRINTED ON T clow, no assignee of this form is NOT	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type) a data will appear on the patent. If an assignee is identified below, the document has been filed of a substitute for filing an assignment. 01/31/2005 MBIZUNE2 00000002 10720528 B) RESIDENCE: (CITY and STATE OR COUNTRY) 01 FC:2501 02 FC:1504 03 FC:8001 15.00					
Please check the appropriate		ries (will not be pri	nted on the p	atent): 🗖 Individual 🗖 Co	rporation or other private g	roup entity Government		
4a. The following fee(s) are o	enclosed:		Payment of	* /				
Issue Fee			A check i	in the amount of the fee(s) is end	closed.			
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.					
Advance Order - # of	Copies <u>5</u>		The Dire Deposit Accord	ctor is hereby authorized by chount Number 08-2460	arge the required fee(s), or (enclose an extra	credit any overpayment, to copy of this form).		
` ` ` `	from status indicated above; AALL ENTITY status. See 3)	_	ant is no longer claiming SMAL		<u> </u>		
The Director of the USPTO is NOTE: The Issue Fee and Punterest as shown by the recon	s requested to apply the Issu blication Fee (if required) w ds of the United States Pate	e Fee and Publicati ill not be accepted nt and Trademark (on Fee (if an from anyone Office.	y) or to re-apply any previously other than the applicant; a regis	paid issue fee to the applic tered attorney or agent; or t	ation identified above. he assignee or other party in		
Authorized Signature				Date_Janı	uary 27, 2005			
Typed or printed name	Patrick J. Hofb	auer		Registration l	No. 32,336			

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

	TRANSMITTAL OF PAYMENT OF ISSUE FEE (Small Entity) (37 C.F.R. 1.311)						Docket No. 1025 / 93154pus	
ŀ	Applicant(s): Patricia J. Marut et al.							
l	Application No.	Filing Date 11/25/2003	Examiner Yeung, James		Customer No. 006431	Group Art Unit 3749	Confirmation No. 5135	
	Invention: PRI	TABLE CONCAVE I	REFLECTOR ASSE	MBLY				
1	Mail Stop Issue Fee COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450							
	Transmitted herewith are the following for the above-identified application. Issue Fee Transmittal Form PTOL-85 Utility Fee: \$ 700.00							
	Publication Fee: \$300.00 A check in the amount of \$1,015.00 is attached.							
	The Director is hereby authorized to charge and credit Deposit Account No. 08-2460 as described below. Charge the amount of Credit any overpayment. Charge any additional fee required. Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. Patrick J. Hofbauer Registration No. 32,336 Suite 205 North 1455 Lakeshore Road Burlington, Ontario, Canada L7S 2J1							
	This co	ficate of Transmission be ertificate may only be u by deposit account this document and a g facsimile transmitted Office (Fax	sed if paying t. uthorization to charge	with first Fee,	eby certify that this the United States Po class mail in an env	s correspondence is estal Service with sufficiency addressed to atents, P.O. Box 145	being deposited ficient postage as "Mail Stop Issue	
	(Date)	<u> </u>			(Date)			
	Signature Signature of Person Mailing Correspondence							
	Typed or Pi	rinted Name of Person Sign	ning Certificate		yped or Printed Name	e of Person Mailing C	orrespondence	